



**U.S. Department of Justice**

*United States Attorney  
Southern District of New York*

*The Silvio J. Mollo Building  
One Saint Andrew's Plaza  
New York, New York 10007*

May 3, 2007

**BY CERTIFIED MAIL**

Wayne B. Wiseman, Esq.  
Wiseman & Hoffman  
460 Park Avenue South, 4<sup>th</sup> floor  
New York, New York 10016

Re: United States v. \$60,000  
07 Civ. 3528

Dear Mr. Wiseman:

This letter is to advise you that on May 2, 2007, the United States commenced a civil action in the United States District Court for the Southern District of New York seeking the forfeiture of the above-referenced sum pursuant to 21 U.S.C. § 881(a)(6) as property involved in the proceeds of narcotics trafficking. A copy of the complaint in this action is enclosed.

Should your client wish to contest the forfeiture, they must do so by filing a claim pursuant to Rule G of the Supplemental Rules for Admiralty or Maritime claims and Asset Forfeiture Actions with the Clerk of the Court no later than thirty five (35) days of the date of this letter. In addition, within twenty (20) days after filing a claim, your clients must file their answer to the complaint. This procedure must be followed regardless of any petition for the remission or mitigation of forfeiture which they may have pending, and failure to do so could result in the entry of a default judgment against the property.

Respectfully,

MICHAEL J. GARCIA  
United States Attorney  
Southern District of New York

By: Anna E. Arreola  
ANNA E. ARREOLA  
Assistant United States Attorney  
Tel. No.: (212) 637-2218

Enclosure

cc: Elvis Rodriguez (By Mail)

U.S. Postal Service <b>CERTIFIED MAIL RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)	
<b>OFFICIAL USE</b>	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$</b>
Postmark Here	
<b>Sent To</b>	Wayne B. Wiseman, Esq.
Street, Apt. No., or PO Box No.	Wiseman & Hoffman
City, State, ZIP+ 4	460 Park Avenue South, 4 <sup>th</sup> floor New York, New York 10016

PS Form 3800, January 2001 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Received by (Please Print Clearly) <u>INEX LOPEZ</u> B. Date of Delivery <u>5/2/07</u></p> <p>C. Signature <u>[Signature]</u> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Wayne B. Wiseman, Esq. Wiseman &amp; Hoffman 460 Park Avenue South, 4<sup>th</sup> floor New York, New York 10016</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Copy from service label)</p> <p>7001 0360 0003 4412 4568</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

U.S. Postal Service <b>CERTIFIED MAIL RECEIPT</b> (Domestic Mail Only; No Insurance Coverage Provided)	
<b>OFFICIAL USE</b>	
Postage	\$
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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$</b>
Postmark Here	
<b>Sent To</b>	
Elvis Rodriguez	
Street, Apt. No., or PO Box No.	
Woodhaven, New York 11421	
City, State, ZIP+ 4	
PS Form 3800, January 2001 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Elvis Rodriguez</p> <p>Woodhaven, New York 11421</p> <p>2. Article Number (Copy from service label)</p>	<p>A. Received by (Please Print Clearly)</p> <p>B. Date of Delivery</p> <p>C. Signature</p> <p>X <i>Elvis Rodriguez</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>3. Service Type?</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

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PS Form 3811, July 1999 Domestic Return Receipt 07CV3528 102595-00-M-0952